2010 DOC Watershed Coordinator Grant Program

Quarterly Invoice Form Instructions

For general guidance on invoicing, please refer to the instructions in your Grant Agreement (GA) [pages 9-11]. Submit your invoice on a quarterly basis according to the Implementation Schedule (Exhibit C) in the GA. Invoices must be submitted in triplicate via hard copy, with all required forms and supporting documentation, to your designated DOC grant administrator (identified in the GA, page 10) to the following address:

[Your assigned grant administrator]
Department of Conservation
Division of Land Resource Protection
801 K St., MS 18-01
Sacramento, CA 95814

- Invoices and quarterly reports are due 30 days <u>after</u> the end of each quarter and may be postmarked as such.
- ◆ Invoices must be submitted in triplicate via hard copy only (electronic copies cannot be processed and will not be accepted): one original and two copies are required for the invoice to be processed. However, only one copy of the report is required.
- ♦ The original invoice must contain an original signature of the authorized agent (in blue ink).
- ♦ Invoices and reports must be submitted together for review and processing. Invoices submitted without reports cannot be processed.
- Invoice copies may be submitted double-sided.
- Please double check all documents for accuracy and have a second person fully review the invoice before submittal to DOC. Incomplete or inaccurate invoices will greatly delay the processing and payment of your invoice.
- ♦ Invoices are processed upon the date of receipt.

Invoicing Templates:

1. <u>Invoice Cover Template</u>: This form is based on the approved budget in your GA (Exhibit B – Budget) and has been tailored for your grant. You are not allowed to add categories or alter this template. If there is a correction needed, please contact your assigned grant administrator. The template was created in MS Word and contains an embedded Excel sheet.

The invoice must be signed by an authorized representative of the grantee; however, it cannot be signed by anyone paid out of the grant. The address on the top of this invoice form is the address to which the payment check will be mailed. If the address is incorrect, please immediately notify your grant administrator.

Hints:

- Invoices are to be sequentially numbered, starting from the number "1." Do not add other numbers or words to this box. Just use 1, 2, 3, etc.
- To access the imbedded Excel sheet on the template, double click your curser within the table. Before printing the completed invoice, scroll to the top of the Excel sheet (make sure that the entire page is visible), then click outside of the Excel sheet. If you do not follow this procedure, only part of the Excel sheet may print. Make sure that the entire Excel sheet is visible before printing the invoice.
- DOC can only reimburse up to the budgeted rates on the approved budget; any amounts exceeding the budget must be covered by the grantee as match.
- Administrative costs cannot exceed 15% of the reimbursement subtotal. Supporting documentation is not required for administrative costs.

2. <u>Invoice Support Forms</u>: There are <u>two</u> support forms created in Excel, <u>Invoice Support Form (a) and (b)</u>.

Both invoice support forms shall be submitted with the invoice cover sheet, along with required supporting documentation. We require the use of a Cross Reference number (CRN) system to help us in processing the invoice. All support documents must include a CRN in the upper right-hand corner of the document to identify the budget line item it corresponds to on the Invoice Support Forms. The purpose of the CRN is to help us to locate the support documents within the invoicing packet.

- a. **Invoice Support Form (a):** Salaries & Benefits. This Invoice Support Form (a) is only for reporting watershed coordinator salary and benefits. Use CRN 1 for salary support documents and CRN 2 for benefit support documents. If the grant has more than one watershed coordinator (WC) position, each can be reported separately using decimals. For example, you can use the CRN 1.1 and 1.2 for salaries and 2.1 and 2.2 for benefits.
- <u>All</u> support documents related to the coordinator salary, such as timesheets and paystubs, should be hand-labeled with a "CRN 1.1" or "CRN 1.2" on the upper right-hand corner of the document.
- WC timesheets or contractor invoices submitted as support documentation must contain two signatures; the WC and the Grant Manager must both sign these documents (refer to the GA, page 11).
- DOC cannot reimburse more than the hourly rate(s) as stated in your Budget. Quarterly invoices should not exceed 520 hours for reimbursement. Additional hours worked may be used as match.
- The totals on the support forms should match the totals claimed on the **Invoice cover template**.
- The benefits claimed should be based on actual expenses and cannot exceed 32% of the coordinator's salary requested for reimbursement. Benefits exceeding 32% are not allowable for match.

- If your coordinator is a consultant or independent contractor, benefits cannot be claimed as such costs should already be included in the consultant's rate.
- If the watershed coordinator is only part-time and holds another staff position within the same organization, timesheets or time logs must clearly identify the duties and hours the person serves as the watershed coordinator under the grant.
- b. **Invoice Support Form (b):** <u>Associated Costs</u>: This **Invoice Support Form (b)** is for reporting all items besides salary and benefits as listed on the **Invoice cover template**. This form will include reimbursement and match information. For the CRN, start with the number 3. For example, if the first item on the form is "Mileage," then the mileage support documentation should be labeled as "CRN 3." If the next item is "Printing," then all printing support documents would be numbered "CRN 4." Please use this CRN procedure for all reimbursement and match costs.

Hints:

- This form was created in Excel and contains formulas that will automatically total the line items within each column.
- Budget line items on the support forms should correspond to the appropriate category line items on the **Invoice cover template**.
- Budget reimbursement items under \$500 do not require the submittal of supporting documents to DOC (refer to page 9 of the GA). However, this documentation must be retained in your organization's grant file for audit purposes.
- If there are no attached support documents for a particular line item, put "N" under the "Support Attached" column.
- 3. <u>Match Support Form</u>: This form is used to verify any in-kind and cash match. Use one form per contributor and have the contributor sign the form. This form was created in MS Word, so you will have to hand total the amounts. For example, if one contributor provides multiple match items such as a computer, use of a vehicle, and technical support, then all of those match items should be listed on one match support form. (Please refer to the GA Section 32, pages 10-11.)

Match for equipment can be allocated all at one time and need not be broken out over the three-year grant period. For example, if your organization is providing a computer as match, you can claim the entire match amount (i.e. \$1,500) on one invoice instead of dividing the cost of the computer over three-years.

<u>Submit three (3) signed hard copies</u> of the quarterly invoice (one original and two copies) and <u>one</u> (1) hard copy of the report (via regular mail; not express mail) to your assigned grant administrator. Invoices should be postmarked within 30 days of the end of the quarter. If you have any questions, please contact your assigned grant administrator.